

01/19/01

1c685 U.S. PTO

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| <p align="center"><b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b></p>  |  | Docket No.: 00247CONT  |  |
|  |  | First Inventor: Toshikazu Ito  |  |
|  |  | Title: PANEL WITH FRAME AND METHOD FOR MANUFACTURING THE SAME  |  |
| <p>Assistant Commissioner for Patents<br/>Box Patent Application<br/>Washington, DC 20231</p>  |  |  |  |
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form<br/>(original and duplicate for processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status<br/>See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification      Total Pages <u>34</u></p> <p>4. <input checked="" type="checkbox"/> Drawings      Total Sheets <u>12</u></p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration      Total Sheets <u>3</u><br/> a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br/> b. <input type="checkbox"/> Copy from prior application<br/> (for continuation/divisional with Box 17 completed)</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>   |  | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence<br/> a. <input type="checkbox"/> Computer Readable Form (CRF)<br/> b. <input type="checkbox"/> Specification Sequence Listing on:<br/> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or<br/> ii. <input type="checkbox"/> paper<br/> c. <input type="checkbox"/> Statements verifying identity of above copies</p>  |  |
|  |  | <p align="center"><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input type="checkbox"/> Assignment &amp; Cover Sheet</p> <p>10. <input type="checkbox"/> 37 CFR 1.373 Statement <input type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document</p> <p>12. <input type="checkbox"/> Information Disclosure Statement with:<br/> <input type="checkbox"/> PTO-1449 <input type="checkbox"/> Copies of Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s)</p> <p>16. <input type="checkbox"/> Other:</p> |  |
| <p>17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:<br/> <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part of prior application No. 09/229,990<br/> Prior application information: Examiner: E. Lee Group Art Unit: 1732<br/> For CONTINUING OR DIVISIONAL APPLICATIONS ONLY: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> |  |  |  |
| <p align="center"><b>18. CORRESPONDENCE ADDRESS</b></p>  |  |  |  |
| Dennison, Scheiner, Schultz & Wakeman<br>612 Crystal Square Four<br>1745 Jefferson Davis Highway<br>Arlington, VA 22202-3417   |  | Customer Number: 23338<br>Telephone: (703) 412-1155, Ext. 23<br>Fax: (703) 412-1161  |  |
| Name: Ira J. Schultz   |  | Registration No.: 28666  |  |
| Signature: <i>Ira J. Schultz</i>   |  | Date: 1/19/2001  |  |



23338

US PATENT AND TRADEMARK OFFICE

09/19/01

| <b>FEE TRANSMITTAL</b><br><b>For FY 2001</b>  |          | Application No: Continuation of 09/229,990<br>Filing Date: Concurrently herewith<br>First Named Inventor: Toshikazu Ito<br>Examiner: E. Lee<br>Group Art Unit: 1732  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
|---|----------|--|-----------|--------------------|----------|-------------------|-----|------------------|-----------|----------------------|----|------------------------|-----|-------------------------------|--|-----------------------|---|------------------------------|--|--|--|--|--|
| <b>TOTAL AMOUNT OF PAYMENT: \$ 728.00</b>   |          | Attorney Docket No.: 00247CONT   |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| <b>METHOD OF PAYMENT</b>  |          | <b>FEE CALCULATION (continued)</b>   |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| 1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:<br>Deposit Account No: 04-0753<br>Dennison, Scheiner, Schultz & Wakeman<br><br><input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  |          | <b>3. ADDITIONAL FEES</b><br>Surcharge- late filing fee or oath<br>Surcharge-late provisional filing fee or cover sheet<br>Non-English specification<br>For filing a request for <i>ex parte</i> reexamination<br>Requesting publication of SIR prior to examiner action<br>Requesting publication of SIR after examiner action<br>Extension of reply within first month<br>Extension of reply within second month<br>Extension of reply within third month<br>Extension of reply within fourth month<br>Extension of reply within fifth month<br>Notice of Appeal<br>Filing a brief in support of appeal<br>Request for oral hearing<br>Petition to institute a public use proceeding<br>Petition to revive- unavoidable<br>Petition to revive- unintentional<br>Utility issue fee (or reissue)<br>Design issue fee<br>Plant issue fee<br>Petition to the Commissioner<br>Petitions related to provisional applications<br>Submission of Information Disclosure Statement<br>Recording each patent assignment per property (x number of properties)<br>Filing a submission after final rejection (37 CFR 1.129(b))<br>For each additional invention to be examined<br>Request for continued examination (RCE)<br>Request for expedited examination of design application<br>Other fee (specify) |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| <b>FEE CALCULATION</b>  |          | SUBTOTAL (3) \$  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| <b>1. BASIC FILING FEE</b><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Utility filing fee</td> <td style="text-align: right;">710.00</td> </tr> <tr> <td>Design filing fee</td> <td></td> </tr> <tr> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>SUBTOTAL (1) \$ 710.00</b></td> </tr> </tbody> </table>   |          | Fee Description  | Fee Paid  | Utility filing fee | 710.00   | Design filing fee |     | Plant filing fee |           | Reissue filing fee   |    | Provisional filing fee |     | <b>SUBTOTAL (1) \$ 710.00</b> |  | SUBTOTAL (2) \$ 18.00 |   |                              |  |  |  |  |  |
| Fee Description   | Fee Paid |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Utility filing fee  | 710.00   |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Design filing fee   |          |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Plant filing fee  |          |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Reissue filing fee  |          |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Provisional filing fee  |          |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| <b>SUBTOTAL (1) \$ 710.00</b>   |          |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| <b>2. EXTRA CLAIM FEES</b><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Extra</th> <th style="text-align: center;">Fee</th> <th style="text-align: center;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims 21</td> <td style="text-align: center;">-20</td> <td style="text-align: center;">= 1</td> <td style="text-align: center;">X 18 = 18</td> </tr> <tr> <td>Independent Claims 3</td> <td style="text-align: center;">-3</td> <td style="text-align: center;">=</td> <td style="text-align: center;">X =</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td style="text-align: center;">=</td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (2) \$ 18.00</b></td> </tr> </tbody> </table> |          |  | Extra     | Fee                | Fee Paid | Total Claims 21   | -20 | = 1              | X 18 = 18 | Independent Claims 3 | -3 | =                      | X = | Multiple Dependent            |  |                       | = | <b>SUBTOTAL (2) \$ 18.00</b> |  |  |  |  |  |
|   | Extra    | Fee  | Fee Paid  |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Total Claims 21   | -20      | = 1  | X 18 = 18 |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Independent Claims 3  | -3       | =  | X =       |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Multiple Dependent  |          |  | =         |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| <b>SUBTOTAL (2) \$ 18.00</b>  |          |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| <b>SUBMITTED BY:</b>  |          |  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Ira J. Schultz, Registration No. 28666  |          | Telephone: (703) 412-1155, Ext. 23   |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |
| Signature:  |          | Date: 1/18/2001  |           |                    |          |                   |     |                  |           |                      |    |                        |     |                               |  |                       |   |                              |  |  |  |  |  |

